10/19/2010 13:41

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIW 3X	For (Other Than A	n Authorized Com	mittee		Office Use Only	
NAME OF COMMITTEE (in full)		FEC MAILING L YPE OR PRINT		typing, type es			
American College of	Radiology Ass	sociation Political	Action Committee				
					1 1 1 1		
ADDRESS (number and st	reet) 18	891 Preston White	e Drive				
Check if differer than previously reported. (ACC)	ı Be	eston			L VA	20191	-
2. FEC IDENTIFICATIO	ON NUMBER	₩ _	CITY 🛕		STATE	ZIPCC	DDE 🛕
C00343459			3. IS THIS REPORT	NEW (N) OR	A (/	MENDED A)	
4. TYPE OF REPOR (Choose One) (a) Quarterly Repor April 15 Quarterly F Quarterly F Quarterly F Quarterly F July 31 Mic Report(Nor Year Only) Termination (TER)	Report(Q1) Report(Q2) Report(Q3) Report(YE) d-Year n-election (MY)	(c) 12-Day PRE-Elec Report for (d) 30-Day Post -Elec Report for	r the: Convertible	May 20 (M5) Jun 20 (M6) Jul 20 (M7) y (12P) at (30G)	Sep	in the	Special (30S)
5. Covering Period	10			ough 10	13	2010	
I certify that I have examin Type or Print Name of Tre		and to the best on the best of		ef it is true, correct	and complete		
Signature of Treasurer NOTE: Submission of fal	Electronically	•	/illiam Herrington		Date 1 0		2 0 1 0 S C 4370
Office Use		, c. moonpiete iiii	Simulation may subject the	s postori digrillig ti	l loport to th	FEC FOR	

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SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

NIS	2 / 50

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name American College of Radiology Association Political Action Committee D D 1.0 10 0 1 2010 13 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 532260.11 January 1 (b) Cash on Hand at 561731.09 Begining of Reporting Period 34525.08 926646.50 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 596256.17 1458906.61 6(a) and 6(c) for Column B) 96100.00 958750.44 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 500156.17 500156.17 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

10. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)

0.00

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 50

Write or Type Committee Name

American College of Radiology Association Political Action Committee

Report Covering the Period:

From:

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Y Y W Y 2010

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	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	33180.08	817032.22
	(ii) Unitemized	1345.00	102048.80
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	34525.08	919081.02
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34525.08	919081.02
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
14. 15.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	7500.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	65.48
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34525.08	926646.50
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	34525.08	926646.50

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 50

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	194.00
	Expenditures(c) Total Operating Expenditures	0.00	134.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	194.00
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	61300.00	919800.00
24.	Independent Expenditure	34800.00	34800.00
25.	(use Schedule E)	0.1000.00	0.1000.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))		
9.	Other Disbursements	0.00	3956.44
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	96100.00	958750.44
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	96100.00	958750.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 50

III. Net Contri Expen	outions/Operating ditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (from Line 11(d), pag	other than loans) e 3)	34525.08	919081.02
34. Total Contribution R (from Line 28(d))	efunds	0.00	0.00
85. Net Contributions (or (subtract Line 34 from (subtract Line 34 from)	her than loans) m Line 33)	34525.08	919081.02
36. Total Federal Opera (add Line 21(a)(i) an	• '	0.00	194.00
7. Offsets to Operating (from Line 15, page	Expenditures 3)	0.00	0.00
88. Net Operating Exper		0.00	194.00

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В.

C.

COLIEDIU E A (EEO E OV)			FOR LINE NUMBER: PAGE 6 / 50				
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12				
		Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
American College of Radiology Association	ion Politic	al Action Committee					
Full Name (Last, First, Middle Initial)							
Dr. James Jelinek			Date of Receipt				
Mailing Address Washington Hospital Cel	nter		10 05 7 Y Y Y Y Y Y Y				
110 Irving St NW BA94 City	State	Zip Code	Transaction ID: 36971146				
Washington	DC	20010-2975	Amount of Each Receipt this Period				
FEC ID number of contributing		200.0 20.0					
federal political committee.	C		45.00				
Name of Employer Center Radiology	Occupation	n ic Radiologist					
Receipt For:		Year-to-Date ▼					
Primary General	1 9994		1				
Other (specify)	0 0	495.00					
Full Name (Last, First, Middle Initial) Dr. Steven Dunnagan			Date of Receipt				
Mailing Address 150 Hickory Creek Cir			M M / D D / Y Y Y Y				
			10 05 2010				
City	State	Zip Code	Transaction ID: 36972897				
Little Rock	AR	72212-2511	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		1200.00				
· · · · · · · · · · · · · · · · · · ·	0 ::						
Name of Employer Radiology Associates, P.A.	Occupation	ո ic Radiologist					
Receipt For:		Year-to-Date ▼					
Primary General	, iggi ogalo		1				
Other (specify) ▼		1800.00					
Full Name (Last, First, Middle Initial) Dr. Douglas Elliott			Date of Receipt				
Mailing Address 2941 N Oakland Zion Rd			M M / D D / Y Y Y Y				
	'		10 05 2010				
City	State	Zip Code	Transaction ID: 36972898				
<u>Fayetteville</u>	AR	72703-4650	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		600.00				
Name of Employer Radiology Associates, P.A.	Occupation Diagnost	n ic Radiologist					
Receipt For:		Year-to-Date ▼	7				
Primary General		1400.00	1				
Other (specify)		1400.00					
			1045.00				
SUBTOTAL of Receipts This Page (optional)		······	1845.00				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/50 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jerome Gehl			Date of Receipt
Mailing Address 33 Edgehill Rd			10 05 2010
City Little Rock	State AR	Zip Code 72207-5461	Transaction ID: 36972899 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	72207-3401	1000.00
Name of Employer Radiology Associates P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Melanie Hoover			Date of Receipt
Mailing Address Radiology Associat 500 S University Av			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State AR	Zip Code	Transaction ID: 36972900
Little Rock FEC ID number of contributing federal political committee.	C	72205-5314	Amount of Each Receipt this Period 600.00
Name of Employer Radiology Associates, P.A.	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	_ , '	Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Dr. Barbara Sandefur			Date of Receipt
Mailing Address 2425 E Boston Mou	untain Dr		10 05 2010
City Fayetteville	State AR	Zip Code 72701-2802	Transaction ID: 36972901 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	72701 2002	300.00
Name of Employer Radiology Associates, P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 700.00	
			1900.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 50 (check only one) X
A 0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may e name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association	ciation Politic	al Action Committee	
۷.	Full Name (Last, First, Middle Initial) Dr. Kathleen Sitarik			Date of Receipt
	Mailing Address Radiology Associates 500 S University Ave			10 05 7 2010
	City Little Rock	State AR	Zip Code 72205-5302	Transaction ID: 36972904
	FEC ID number of contributing federal political committee.	C	72203-5502	Amount of Each Receipt this Period 1200.00
	Name of Employer Radiology Associates PA	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	_'	Year-to-Date ▼ 2200.00	
	Full Name (Last, First, Middle Initial) Dr. David Tamas			Date of Receipt
	Mailing Address 9 Hickory Hills Cir			1 0 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 36972905
	Little Rock	AR	72212-2766	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Radiology Associates, P.A.	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	
	Full Name (Last, First, Middle Initial) Dr. Albert S. Alexander			Date of Receipt
	Mailing Address 3612 Foxcroft Rd			10 05 YYYYY 2010
	City	State	Zip Code	Transaction ID: 36972906
	Little Rock FEC ID number of contributing federal political committee.	C	72227-2333	Amount of Each Receipt this Period 1000.00
	Name of Employer Radiology Associates, P.A.	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, ' 	Year-to-Date ▼ 1000.00	
				3200.00

SCHEDULE A (FECFITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 50 (check only one) X 11a
Any information copied from such or for commercial purposes, othe NAME OF COMMITTEE (In F American College of Rad	r than using the name and actual	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle DR Kevin Serey Mailing Address 12608 Wood City Prospect FEC ID number of contributing federal political committee. Name of Employer Radiology Associates	State KY C Occupati	Zip Code 40059-7116 on stic Radiologist	Date of Receipt 10 05 2010 Transaction ID: 36978071 Amount of Each Receipt this Period 1000.00
Receipt For: Primary Gener Other (specify) ▼	al	te Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Dr. Kelly B. Colomb Mailing Address 3008 Lau City Floyds Knobs FEC ID number of contributing federal political committee. Name of Employer Radiology Associates	State IN C		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Gener Other (specify) ▼	Aggregat	etic Radiologist te Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Dr. Lloyd E. Stambaugh, III Mailing Address 15617 NE City Woodinville FEC ID number of contributing federal political committee.	State WA	Zip Code 98072-8126	Date of Receipt 10 08 2010 Transaction ID: 37106126 Amount of Each Receipt this Period
Name of Employer Radia Imaging Receipt For: Primary Gener	Aggregat	on stic Radiologist te Year-to-Date ▼	
Other (specify) ▼ SUBTOTAL of Receipts This Pa	0 0	1000.00	2250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Grantham		Date of Receipt
Mailing Address 50591 Glenshire Ct		10 08 7 2010
City	State Zip Code	Transaction ID: 37106127
Granger	IN 46530-4978	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Daniel Walsh		Date of Receipt
Mailing Address 9198 Hemingway Gro	ove Cir	10 12 2010
City	State Zip Code	Transaction ID: 37124595
Knoxville	TN 37922-8090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Abercrombie Radiological Consultants	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Francis Greg Curtin	<u> </u>	Date of Receipt
Mailing Address 809 Creswell Ct		10 12 2010
City	State Zip Code	Transaction ID: 37124596
Knoxville	TN 37919-7447	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Abercrombie Radiological Consultants	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		800.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 50 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. John Simmons Mailing Address 3530 Maloney Rd City Knoxville	State TN	Zip Code 37920-7316	Date of Receipt 10 12 2010 Transaction ID: 37124597 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07020 7010	250.00
Name of Employer Abercrombie Radiology Receipt For: Primary General Other (specify) ▼		n ic Radiologist e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Diane Edge Mailing Address 1401 Queensbridge	e Dr		Date of Receipt 10 12 2010
City	State	Zip Code	Transaction ID: 37124598
Knoxville	TN	37922-6083	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Abercrombie Radiological Consultants Receipt For: Primary General Other (specify) ▼		n ic Radiologist • Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Daniel Baker			Date of Receipt
Mailing Address 304 Brooke Valley	Blvd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37124599
Knoxville FEC ID number of contributing federal political committee.	C	37922-3557	Amount of Each Receipt this Period 250.00
Name of Employer Abercrombie Radiological Consultants Receipt For:		n ic Radiologist y Year-to-Date ▼	
Primary General Other (specify) ▼	, aggregate	250.00	
	I		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 50 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	he name and add	lress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Wayne Eberenz Mailing Address 6820 Stone Mill Dr City Knoxville FEC ID number of contributing federal political committee. Name of Employer Abercrombie Radiological Consultants		c Radiologist	Date of Receipt 10 12 2010 Transaction ID: 37124670 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Donna Culhane Mailing Address 6820 Stone Mill Dr			Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37124671
Knoxville FEC ID number of contributing federal political committee.	C	37919-7496	Amount of Each Receipt this Period 250.00
Name of Employer Abercrombie Radiological Consultants Receipt For: Primary General Other (specify) ▼	_, '	n c Radiologist Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Evancho			Date of Receipt
Mailing Address 2330 Craig Cove Rd			10 / 12 / Y Y Y Y
City	State TN	Zip Code	Transaction ID: 37124672
Knoxville FEC ID number of contributing federal political committee.	C	37919-9311	Amount of Each Receipt this Period 250.00
Name of Employer Abercrombie Radiological Consultants Receipt For: Primary General Other (specify) ▼	- 	n c Radiologist Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	'		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 13 / 50 (check only one) X		
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
American College of Radiology Associa	ation Politic	al Action Committee			
Full Name (Last, First, Middle Initial) Dr. William McKissick			Date of Receipt		
Mailing Address 2414 Caravel Ln			M M / D D / Y Y Y Y Y 1 D D / Y 2 D D D D D D D D D D D D D D D D D D		
City	State	Zip Code	Transaction ID: 37124673		
Knoxville	TN	37922-6174	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Acrocrombie Radiological	Occupatio	n			
Consultants		ic Radiologist			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼		250.00			
Full Name (Last, First, Middle Initial) Dr. Lane Williams			Date of Receipt		
Mailing Address 3922 Glenfield Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 37124674		
<u>Knoxville</u>	TN	37919-6698	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Abercrombie Radiological Consultants	Occupatio Diagnost	n ic Radiologist			
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Christopher Aikens			Date of Receipt		
Mailing Address 1621 Wembley Hills Ro	d		10 12 2010		
City	State	Zip Code	Transaction ID: 37124795		
Knoxville	TN	37922-8583	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer Abercrombie Radiological Consultants	Occupatio Diagnost	n ic Radiologist			
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼	0 0	250.00			
SUBTOTAL of Receipts This Page (optional)			750.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 50 (check only one) X 11a
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jason Cameron		Date of Receipt
Mailing Address Abercrombie Radiolo 1112 Weisgerber Rd		M M / D D / Y Y Y Y Y Y 1 Y 1 D D / Y 2 D 1 D
City	State Zip Code	Transaction ID: 37124796
Knoxville	TN 37909-2647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Abercrombie Radiological	Occupation Diagnostic Radiologist	
Consultants Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Goeser	_1	Date of Receipt
Mailing Address 740 Lamplighter Cir	SE	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State Zip Code	Transaction ID: 37124799
Salem	OR 97302-3941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Diagnostic Imaging Associ- ates. Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Rita S. Patel		Date of Receipt
Mailing Address 3 Ware Rd		10 12 2010
City	State Zip Code	Transaction ID: 37125014
Upper Saddle River	NJ 07458-1919	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	630.00	
		530.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	g the name and addre	ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mitchell Miller Mailing Address 2 Constitution Ct A	unt 1009		Date of Receipt
City Hoboken	State NJ	Zip Code 07030-6730	1 0 1 2 2 0 1 0 Transaction ID: 37125015 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation		30.00
Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼	Diagnostic	Radiologist fear-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce Mailing Address 509 48th Ave Apt 2	2A		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37125016
Long Island City	NY	11101-5604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Hackensack Radiology Group		Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone	105		Date of Receipt
Mailing Address 440 E 62nd St Apt	185		10 12 2010
City	State	Zip Code	Transaction ID: 37125017
New York FEC ID number of contributing federal political committee.	C	10065-8345	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group		Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (option	al)		90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16/50 (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde			Date of Receipt
Mailing Address 7 Kinkaid Ave			M M / D D / Y Y Y Y Y 1 1 1 2 2 0 1 0
City	State NJ	Zip Code	Transaction ID: 37125018
Closter FEC ID number of contributing federal political committee.	C	07624-2908	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Dr. Adam Bogomol			Date of Receipt
Mailing Address 200 W 72nd St Apt	t 11k		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New York	State NY	Zip Code	Transaction ID: 37125061
FEC ID number of contributing federal political committee.	C	10023-2805	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	_ , '	Year-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR			Date of Receipt
Mailing Address Hackensack Univer 30 Prospect Ave	rsity Medical Cti		M M / D D / Y Y Y Y Y 1 Y 1 1 D 1 2 D 1 D 1 D 1 D 1 D 1 D 1 D 1 D
City Hackensack	State NJ	Zip Code 07601-1914	Transaction ID: 37125062 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	070011014	30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (optional	- I		90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 50 (check only one) X
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personal the name and address of any political committee to sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert Mailing Address 124 W 60th St Apt		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City New York FEC ID number of contributing	State Zip Code NY 10023-7451	Transaction ID: 37125064 Amount of Each Receipt this Period 30.00
Receipt For: Primary Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 630.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason Mailing Address 506 Julie Ct		Date of Receipt 1 0 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 37125065
Wyckoff FEC ID number of contributing federal political committee.	NJ 07481-1101	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Dr. David Panush		Date of Receipt
Mailing Address 538 E 84th St Apt 4	E	10 12 2010
City New York	State Zip Code NY 10028-7357	Transaction ID: 37125066 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (optional	l)	90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 50 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joel Rakow			Date of Receipt
Mailing Address 505 Ivy Lane City	State	Zip Code	1 0 1 2 2 0 1 0 Transaction ID: 37125091
Wyckoff FEC ID number of contributing federal political committee.	C	07481-1072	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group Receipt For:		ic Radiologist	
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 630.00]
Full Name (Last, First, Middle Initial) Dr. Patrick Toth Mailing Address 201 E 80th St Apt	8F		Date of Receipt 1 0 1 2 2 0 1 0
City	State	Zip Code	Transaction ID: 37125092
New York	NY	10021-0515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Dr. John DeMeritt	<u> </u>		Date of Receipt
Mailing Address 18 Baldwin Rd			10 12 2010
City	State	Zip Code	Transaction ID: 37125093
Saddle River FEC ID number of contributing federal political committee.	C	07458-3203	Amount of Each Receipt this Period 30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (options	al)		90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/50 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asse	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Regina Chu			Date of Receipt
Mailing Address 15 Ogle Rd			10 12 2010
City Old Tappan	State NJ	Zip Code 07675-7028	Transaction ID: 37125094 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 365.37	
Full Name (Last, First, Middle Initial) Dr. Sunitha Sunkavalli	I		Date of Receipt
Mailing Address 943 High Mountain I	Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37125095
Franklin Lakes FEC ID number of contributing	NJ C	07417-1619	Amount of Each Receipt this Period
federal political committee.	<u> </u>		10.20
Name of Employer Hackensack Radiology Group	Occupation Diagnost	ո ic Radiologist	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	-
Other (specify) ▼	8 8	384.60	
Full Name (Last, First, Middle Initial) Dr. Margaret Emy			Date of Receipt
Mailing Address 245 Oxford Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37125096
Tenafly FEC ID number of contributing federal political committee.	NJ C	07670-3117	Amount of Each Receipt this Period 19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	384.60	

t State NJ C Occupation Diagnostic		Date of Receipt Date of Receipt Transaction ID: 37125097 Amount of Each Receipt this Period Date of Receipt 19.23
t State NJ C Occupation Diagnostic Aggregate Y	Zip Code 07631-3033 c: Radiologist Year-to-Date ▼	Transaction ID: 37125097 Amount of Each Receipt this Period 19.23
State NJ C Occupation Diagnostic Aggregate Y	07631-3033 c Radiologist Year-to-Date ▼	Transaction ID: 37125097 Amount of Each Receipt this Period 19.23
State NJ C Occupation Diagnostic Aggregate Y	07631-3033 c Radiologist Year-to-Date ▼	Transaction ID: 37125097 Amount of Each Receipt this Period 19.23
Occupation Diagnostic Aggregate Y	07631-3033 c Radiologist Year-to-Date ▼	Amount of Each Receipt this Period 19.23
Occupation Diagnostic Aggregate Y	: Radiologist ∕ear-to-Date ▼	19.23
Occupation Diagnostic Aggregate Y	Year-to-Date ▼	
Diagnostic Aggregate Y	Year-to-Date ▼	Date of Receipt
		Date of Receipt
Apt 19E		Date of Receipt
Apt 19E		
		10 12 2010
State	Zip Code	Transaction ID: 37125098
NY	10019-1006	Amount of Each Receipt this Period
C		19.23
Occupation Diagnostic	: Radiologist	
Aggregate Y	Year-to-Date ▼ 384.60	
		Date of Receipt
e Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State	Zip Code	Transaction ID: 37125099
NJ	07605-1415	Amount of Each Receipt this Period
C		19.23
Occupation Diagnostic	: Radiologist	
	Occupation Diagnostic	NJ 07605-1415 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼

Any information copied from such Reports and Statements may not be sold or used by any por for commercial purposes, other than using the name and address of any political committee NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Dr. Gene Han Mailing Address 24 Briarcliff Rd City State Zip Code Tenafly NJ 07670-2902 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City State Zip Code NJ 07631-3081 FEC ID number of contributing federal political committee. City State Zip Code NJ 07631-3081 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ State Zip Code NJ 07631-3081 FEC ID number of contributing federal political committee. Pagregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code NJ 07601-1962	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Dr. Gene Han Mailing Address 24 Briarcliff Rd City State Zip Code Tenafly NJ 07670-2902 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ General Other (specify) ▼ State Zip Code NJ 07631-3081 FEC ID number of contributing federal political committee. City State Zip Code NJ 07631-3081 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Name of Employer Hackensack Radiology Group Name of Employer Hackensack Radiology Group Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 384.60 Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	Transaction ID: 37125100 Amount of Each Receipt this Period
City Tenafly State Zip Code Tenafly NJ 07670-2902 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City State Zip Code NJ 07631-3081 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	Transaction ID: 37125100 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City State Zip Code Englewood FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City State Zip Code NJ 07631-3081 C C FULL Name of Employer Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	
Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City State Zip Code Englewood NJ 07631-3081 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ C City State Zip Code NJ 07631-3081 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	19.23
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City Englewood FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ State Aggregate Year-to-Date ▼ State State Zip Code	
Primary General Other (specify) ▼ State Zip Code	
Dr. Robert Krugman Mailing Address 10 Lexington Ct City State Zip Code Englewood NJ 07631-3081 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Primary General Other (specify) ▼ C Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	
City State Zip Code Englewood NJ 07631-3081 FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	Date of Receipt
Englewood FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	10 12 2010
FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	Transaction ID: 37125101
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	Amount of Each Receipt this Period 19.23
Primary General Other (specify) ▼ State Zip Code Primary General 384.60 Full Name (Last, First, Middle Initial) Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	
Dr. Gail Starr Mailing Address Hackensack Univ Med Ctr 20 Prospect Ave Ste 513 City State Zip Code	
City State Zip Code	Date of Receipt
	10 12 / Y Y Y Y Y
Hackensack NJ 07601-1962	Transaction ID: 37125102 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	19.23
Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist	
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date 384.60	
SUBTOTAL of Receipts This Page (optional)	

SCHEDULE A (FEC Form	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	rts and Statements may not be sold or used by any persousing the name and address of any political committee to Association Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Dr. Gregory Nicola Mailing Address 101 W End Ave	e Apt 16H	Date of Receipt	
City New York FEC ID number of contributing	State Zip Code NY 10023-6337	1 0 1 2 2 0 1 0 Transaction ID: 37125103 Amount of Each Receipt this Period 19.23	
Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 403.83		
Full Name (Last, First, Middle Initial) Dr. James Amerson, JR Mailing Address 3122 Kingscliff	Way NE	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 37125104	
Atlanta FEC ID number of contributing federal political committee.	GA 30345-2128	Amount of Each Receipt this Period 500.00	
Name of Employer Northside Radiology Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00		
Full Name (Last, First, Middle Initial) Dr. Richard Barlow		Date of Receipt	
Mailing Address 280 Quiet Wate	er Ln	10 12 2010	
City Atlanta	State Zip Code GA 30350-3720	Transaction ID: 37125105	
FEC ID number of contributing federal political committee.	C 3030-3/20	Amount of Each Receipt this Period 500.00	
Name of Employer Northside Hospital	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (or	itional)	1019.23	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Lynn Baxter Mailing Address 939 Briarcliff Rd N	ıF.	Date of Receipt
City	State Zip Code	1 0 1 2 2 0 1 0 Transaction ID: 37125107
Atlanta FEC ID number of contributing federal political committee.	GA 30306-4664	Amount of Each Receipt this Period 500.00
Name of Employer Northside Radiology Associates Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Patrick Datoc Mailing Address 1685 High Trl		Date of Receipt 10 12 2010
City Atlanta FEC ID number of contributing federal political committee.	State Zip Code GA 30339-5690	Transaction ID: 37125108 Amount of Each Receipt this Period 500.00
Name of Employer Northside Radiology Associates Receipt For: Primary Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. Jose De Lima, JR Mailing Address 5351 Northland Dr	NF	Date of Receipt
City <u>Atlanta</u>	State Zip Code GA 30342-2009	Transaction ID: 37125109 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Assoc- iates Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	nal)	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 50 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As			
Full Name (Last, First, Middle Initial) Dr. Clifford Feiner			Date of Receipt
Mailing Address 91 Blackland Dr N	W		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Atlanta	State GA	Zip Code 30342-4401	Transaction ID: 37125110
FEC ID number of contributing federal political committee.	C	30342-4401	Amount of Each Receipt this Period 500.00
Name of Employer Northside Radiology Associates, P.C. Receipt For:	 	n ic Radiologist Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	500.00 ▼	
Full Name (Last, First, Middle Initial) Dr. Tanya Fields			Date of Receipt
Mailing Address 10891 Bossier Dr			10 12 2010
City	State	Zip Code	Transaction ID: 37125111
Alpharetta FEC ID number of contributing	GA C	30022-7360	Amount of Each Receipt this Period 500.00
federal political committee.	<u> </u>		
Name of Employer Northside Radiology Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		500.00	
Full Name (Last, First, Middle Initial) Dr. Amy Figueroa			Date of Receipt
Mailing Address 2 Coventry Close			10 12 2010
City	State	Zip Code	Transaction ID: 37125114
Avondale Estates FEC ID number of contributing	GA	30002-1437	Amount of Each Receipt this Period
federal political committee.	C		500.00
Name of Employer Northside Radiology Associates, P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 50 (check only one) X
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associated	tion Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Soheil Hanna			Date of Receipt
Mailing Address Northside Hospital 1000 Johnson Ferry Rd	NE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37125115
<u>Atlanta</u>	GA	30342-1606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Northside Radiology Assoc-	Occupation		7
iates		ic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Douglas Kallman			Date of Receipt
Mailing Address 5281 Vernon Springs Tr	I NW		M M / D D / Y Y Y Y Y Y Y 1 1 0 1 2 2 0 1 0
City	State	Zip Code	Transaction ID: 37125116
<u>Atlanta</u>	GA	30327-4511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Northside Radiology Associates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Eugene Lee			Date of Receipt
Mailing Address 5775 Glenridge Dr NE Bldg B Ste 360			10 12 YYYY 10 12 2010
City	State	Zip Code	Transaction ID: 37125117
<u>Atlanta</u>	GA	30328-5380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Northside Radiology Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Primary General	0 0	500.00	1500.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Benerits a	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 26 / 50 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	of the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard Meli		Date of Receipt
Mailing Address 3359 Glenrose Trl		M M / D D / Y Y Y Y Y 1 1 1 1 2 1 2 0 1 0
City	State Zip Code	Transaction ID: 37125118
Atlanta	GA 30341-5783	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Assoc-	Occupation Diagnostic Radiologist	
iates Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Steven Moss	I	Date of Receipt
Mailing Address 220 Westminster F	PI	M M / D D / Y Y Y Y Y 1 1 0 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 37125121
<u>Atlanta</u>	GA 30350-5548	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Assoc-	Occupation Diagnostic Radiologist	
iates Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Mark Nicol		Date of Receipt
Mailing Address Northside Hospital 1000 Johnson Ferr	v Rd NE	M M / D D / Y Y Y Y 1 1 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 37125122
<u>Atlanta</u>	GA 30342-1611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Northside Radiology Assoc-	Occupation Diagnostic Radiologist	
iates, P.C. Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	500.00	
	al)	1500.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than usin	and Statements may not be sold or used by any person g the name and address of any political committee to a sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Dr. Kathleen Nixon Mailing Address 195 Avery Dr NE		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125123
<u>Atlanta</u>	GA 30309-2700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Associates, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Todd Ostrow		Date of Receipt
Mailing Address 265 Pineland Rd N	NW	M M / D D / Y Y Y Y Y Y 1 1 0 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 37125124
<u>Atlanta</u>	GA 30342-4018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Serge Ouanounou		Date of Receipt
Mailing Address 50 Battle Ridge Di	r NE	M M / D D / Y Y Y Y Y Y 1 Y 1 1 1 1 1 1 1 1 1 1 1
City	State Zip Code	Transaction ID: 37125125
Atlanta	GA 30342-2451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	nal)	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 50 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and ado	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Sharon Rim			Date of Receipt
Mailing Address 3810 Tynemoore V City	Valk SE State	Zip Code	1 0 1 2 2 0 1 0 Transaction ID: 37125126
Smyrna	GA	30080-5992	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Northside Radiology Associates	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Dr. Brian Sydow Mailing Address 11014 Taconic Wa	V		Date of Receipt
			10 12 2010
City	State	Zip Code	Transaction ID: 37125127
<u>Duluth</u>	<u>GA</u>	30097-1937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Northside Radiology Assoc- iates		c Radiologist	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
Other (specify)		500.00	
Full Name (Last, First, Middle Initial) Dr. Russell Tippins	•		Date of Receipt
Mailing Address 4 Polo Dr NE			10 12 2010
City	State	Zip Code	Transaction ID: 37125128
Atlanta	GA	30309-2720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Northside Radiology Assoc- iates	<u> </u>	c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports a	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 50 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any political committee to a	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert Tyrrel		Date of Receipt
Mailing Address 3910 W Nancy Cro	eek Ct NE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125129
Atlanta	GA 30319-4810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Assoc-	Occupation Diagnostic Radiologist	
<u>iates</u> Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Sreekanth Vemuri		Date of Receipt
Mailing Address 730 Glenairy Dr N	E	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125130
Atlanta	GA 30328-4217	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Associates	Occupation Diagnostic Radiologist	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Carolyn Weaver	I	Date of Receipt
Mailing Address Northside Radiolog 5775 Glenridge Dr		10 12 2010
City	State Zip Code	Transaction ID: 37125132
<u>Atlanta</u>	GA 30328-5380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northside Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	nal)	1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 50 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association	ciation Politic	al Action Committee	
۷.	Full Name (Last, First, Middle Initial) Dr. James Weinstein			Date of Receipt
	Mailing Address 741 Burning Tree Dr S	SE		10 12 7 2010
	City Marietta	State GA	Zip Code	Transaction ID: 37125133
	FEC ID number of contributing federal political committee.	C	30067-4721	Amount of Each Receipt this Period 500.00
	Name of Employer Northside Radiology Associates	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- s.	Full Name (Last, First, Middle Initial) Dr. James Zakem			Date of Receipt
	Mailing Address 5005 Riverview Rd N\	N		10 12 2010
	City	State	Zip Code	Transaction ID: 37125134
	Atlanta FEC ID number of contributing federal political committee.	GA C	30327-4237	Amount of Each Receipt this Period 500.00
	Name of Employer Northside Radiology Assoc- iates	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
. –	Full Name (Last, First, Middle Initial) Dr. John Booker, JR			Date of Receipt
	Mailing Address PO Box 308			M M / D D / Y Y Y Y Y 1 1 2 2 0 1 0
	City	State	Zip Code	Transaction ID: 37125135
	Hickory FEC ID number of contributing federal political committee.	NC C	28603-0308	Amount of Each Receipt this Period
	Name of Employer Catawba Radiological Asso- ciates	, ' 	ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 591.67	
Γ	SUBTOTAL of Receipts This Page (optional) .			1150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 50 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associately Full Name (Last, First, Middle Initial) Dr. Steven Harlan	e name and address of any political committee to	solicit contributions from such committee. Date of Receipt
Mailing Address CRA 18 13th Ave NE City Hickory FEC ID number of contributing federal political committee.	State Zip Code NC 28601-3748	Transaction ID: 37125136 Amount of Each Receipt this Period 150.00
Name of Employer Catawba Radiological Associates, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 591.67	
Full Name (Last, First, Middle Initial) Dr. William Thorwarth, JR Mailing Address Catawba Radiological PO Box 308 City Hickory FEC ID number of contributing federal political committee. Name of Employer Catawba Radiological Associates Receipt For: Primary General Other (specify)	Assoc State Zip Code NC 28603-0308 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 650.00	Date of Receipt M M J D D J Z 2 0 1 0 Transaction ID: 37125139 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Dr. Nicholas Frankel Mailing Address PO Box 9470 City Hickory FEC ID number of contributing federal political committee. Name of Employer Catawba Radiological Associates, Inc. Receipt For: Primary General Other (specify)	State Zip Code NC 28603-9470 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 591.67	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		450.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 50 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Bools Mailing Address Catawba Radiologic	eal Assoc		Date of Receipt
18 13th Ave NE	A 73300		10 12 2010
City	State	Zip Code	Transaction ID: 37125141
Hickory FEC ID number of contributing federal political committee.	NC C	28601-3748	Amount of Each Receipt this Period 150.00
Name of Employer Catawba Radiological Associates, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n cic Radiologist e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Charles Scheil Mailing Address 281 44th Avenue Cir	r NW		Date of Receipt
-			10 12 2010
City Hickory	State NC	Zip Code	Transaction ID: 37125142
FEC ID number of contributing federal political committee.	C	28601-9016	Amount of Each Receipt this Period
Name of Employer Catawba Radiological Associates, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	_, '	n ric Radiologist e Year-to-Date ▼ 591.67	
Full Name (Last, First, Middle Initial) Dr. Alan Massengill			Date of Receipt
Mailing Address Catawba Radiologic PO Box 308	al Assoc		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37125143
Hickory FEC ID number of contributing federal political committee.	NC C	28603-0308	Amount of Each Receipt this Period 150.00
Name of Employer Catawba Radiological Asso- ciates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 591.67	
SUBTOTAL of Receipts This Page (optional)		450.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 50 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		Data of Dansins
Dr. Michael Jacobs Mailing Address 3818 11th Street PI I	NE	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125147
Hickory	NC 28601-8420	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 591.67	
Full Name (Last, First, Middle Initial) Dr. Eric Rautiola		Date of Receipt
Mailing Address 821 8th St NW		M M / D D / Y Y Y Y Y Y 1 1 0 1 2 2 0 1 0
City	State Zip Code	Transaction ID: 37125148
Hickory	NC 28601-3541	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 591.67	
Full Name (Last, First, Middle Initial) Dr. Keith Harper		Date of Receipt
Mailing Address 602 46th Ave Dr NE		10 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125149
Hickory	NC 28601-7318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 591.67	
SUBTOTAL of Receipts This Page (optional))	450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Association	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Knox Tate		Date of Receipt
Mailing Address 809 8th Ave NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125150
<u>Hickory</u>	NC 28601-3548	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	591.63	
Full Name (Last, First, Middle Initial) Dr. Paul Radecki		Date of Receipt
Mailing Address 1 Great Elm Ct		10 12 7 2010
City	State Zip Code	Transaction ID: 37125835
Potomac	MD 20854-1228	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Barbara Robins	1	Date of Receipt
Mailing Address 244 Derwen Rd		10 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125836
Merion Station	PA 19066-1229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Group of Abingt- on	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SURTOTAL of Receipts This Page (entional)	1	650.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	· ·	650.0

Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass Full Name (Last, First, Middle Initial) Dr. Kendall Wong Mailing Address Bloomington Radiol 2200 Fort Jesse Rd City Normal FEC ID number of contributing federal political committee. Name of Employer Bloomington Radiology, SC. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Marion Brody Mailing Address 1346 Garden Rd	ogy, S.C.	on for the purpose of soliciting contributions o solicit contributions from such committee. Date of Receipt
A. Full Name (Last, First, Middle Initial) Dr. Kendall Wong Mailing Address Bloomington Radiol 2200 Fort Jesse Rd City Normal FEC ID number of contributing federal political committee. Name of Employer Bloomington Radiology, S C. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Marion Brody	ogy, S.C. Ste 280	Date of Receipt
Mailing Address Bloomington Radiol 2200 Fort Jesse Rd City Normal FEC ID number of contributing federal political committee. Name of Employer Bloomington Radiology, SC. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Marion Brody	Ste 280	Date of Receipt
2200 Fort Jesse Rd City Normal FEC ID number of contributing federal political committee. Name of Employer Bloomington Radiology, S C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Marion Brody	Ste 280	—
Normal FEC ID number of contributing federal political committee. Name of Employer Bloomington Radiology, SC. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Marion Brody	State Zip Code	10 12 2010
FEC ID number of contributing federal political committee. Name of Employer Bloomington Radiology, SC. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Marion Brody	II 04704 0004	Transaction ID: 37125837
Name of Employer Bloomington Radiology, S C. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Marion Brody	IL 61761-2281	Amount of Each Receipt this Period 500.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Marion Brody	Occupation Diagnostic Radiologist	
Dr. Marion Brody	Aggregate Year-to-Date ▼ 500.00]
Mailing Address 1346 Garden Rd		Date of Receipt
		10 12 2010
City	State Zip Code	Transaction ID: 37125838
Wynnewood FEC ID number of contributing federal political committee.	PA 19096-3624	Amount of Each Receipt this Period 500.00
Name of Employer Fox Chase Cancer Center	Occupation Radiology Resident	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Stephen Miller		Date of Receipt
Mailing Address 8700 Sudley Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37125840
Manassas FEC ID number of contributing federal political committee.	VA 20110-4418	Amount of Each Receipt this Period 250.00
Name of Employer Virginia Radiology Associ- ates		_
Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist	
SUBTOTAL of Receipts This Page (optional]

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to a sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	oodalion i oliloa i i olilon oominiloo	
Dr. Isaac Kirk, III Mailing Address 3756 Westerman		Date of Receipt
City	State Zip Code	10 13 2010
Houston	TX 77005-1168	Transaction ID: 37130651 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Joseph Radiology Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Shawn Teague		Date of Receipt
Mailing Address 11844 Tarver Ct		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37130653
Fishers	IN 46037-8277	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Indiana Univ School of Me- dicine	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Bobby Thomas		Date of Receipt
Mailing Address 1961 Crystal Hills	Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37130664
Athens	GA 30606-5389	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Athens Radiology Associates, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	625.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 50 (check only one) X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to	
American College of Radiology Ass Full Name (Last, First, Middle Initial) Dr. Darrin Johnson	sociation Political Action Committee	Date of Receipt
Mailing Address 1701 Drake Ave	01-12 7'- 0-1-1-	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Huntsville	State Zip Code AL 35802-1042	Transaction ID: 37130665 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology of Huntsville	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael George	-	Date of Receipt
Mailing Address 1620 John St S		10 13 2010
City	State Zip Code	Transaction ID: 37130667
Salem	OR 97302-5110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Salem Radiology Consultan-	Occupation Diagnostic Radiologist	
ts Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. James Rickards		Date of Receipt
Mailing Address 1266 NW Countrys	ide Ct	10 13 2010
City	State Zip Code	Transaction ID: 37130669
McMinnville	OR 97128-9528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer McMinnville Imaging Associates Receipt For:	Occupation Diagnostic Radiologist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Dags (entires	l)	750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports a or for commercial purposes, other than usin	and Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any personers of any political committee to	FOR LINE NUMBER: PAGE 38 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions a solicit contributions from such committee
NAME OF COMMITTEE (In Full)	ig the name and add	uross or any ponnoai comminee to	o solicit continuations from such committee.
American College of Radiology As	ssociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Bradford Richmond			Date of Receipt
Mailing Address Cleveland Clinic F 9500 Euclid Ave	oundation		10 13 2010
City	State	Zip Code	Transaction ID: 37130745
Cleveland	OH	44195-5021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Cleveland Clinic Foundati- on	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Eric Tocci	l		Date of Receipt
Mailing Address 437 Triton Road			10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37130746
Ormond Beach	FL	32176-5459	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Radiology Associates of Daytona Beach	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Dr. Scott Klioze	I		Date of Receipt
Mailing Address 7 Cypress Hollow	Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Ormond Beach	State FL	Zip Code 32174-3047	Transaction ID: 37130747
FEC ID number of contributing federal political committee.	C	32174-3047	Amount of Each Receipt this Period
Name of Employer Radiology Associates of Daytona Beach	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)		190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 50 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may he name and addr	not be sold or used by any person ess of any political committee to	
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politica	Action Committee	
Full Name (Last, First, Middle Initial) Dr. Robert Newman			Date of Receipt
Mailing Address 913 Southview PI NE			10 13 2010
City <u>Lenoir</u>	State NC	Zip Code 28645-3755	Transaction ID: 37130748 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Lenoir Radiology	Occupation Diagnostic	: Radiologist	
Receipt For: Primary General Other (specify) ▼		/ear-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Andrew Beloni			Date of Receipt
Mailing Address 5624 Laurium Rd			10 13 YYYY 10 13 2010
City	State	Zip Code	Transaction ID: 37130749
<u>Charlotte</u>	NC	28226-5610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.00
Name of Employer Charlotte Radiology	Occupation Diagnostic	: Radiologist	
Receipt For:	Aggregate \	/ear-to-Date ▼	
Primary General Other (specify) ▼		450.00	
Full Name (Last, First, Middle Initial) Dr. Ira Adler	1		Date of Receipt
Mailing Address 879 Lexington Dr			10 13 2010
City	State	Zip Code	Transaction ID: 37130752
Greenville FEC ID number of contributing	NC C	27834-0549	Amount of Each Receipt this Period 40.00
federal political committee. Name of Employer Eastern Radiologists	Occupation		
		Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)			135.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any persone name and address of any political committee to ciation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. David Buck Mailing Address 272 Harrison Rd City Turtle Creek FEC ID number of contributing federal political committee. Name of Employer Greensburg X-Ray Associates Receipt For: Primary General Other (specify)	State Zip Code PA 15145-1042 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 304.20	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 37130753 Amount of Each Receipt this Period 30.42
Full Name (Last, First, Middle Initial) Dr. Kevin O'Brien Mailing Address St Johns Macomb Ho 11800 E 12 Mile Rd City Warren FEC ID number of contributing	Ospital State Zip Code MI 48093-3494	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
rederal political committee. Name of Employer Diagnostic Radiology Consultants, PC Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 626.70	83.34
Full Name (Last, First, Middle Initial) Dr. Terry Martin Mailing Address Rad Assoc of Biirmin 2090 Columbiana Rd City		Date of Receipt M M M
Birmingham FEC ID number of contributing federal political committee.	AL 35216-2152	Amount of Each Receipt this Period
Name of Employer Rad Assoc of Biirmingham PC Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional)		213.76

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and or for commercial purposes, other than using the second such as the second su	d Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 1 on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asse			solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kent Lancaster Mailing Address 3141 Sundance Patl	h		Date of Receipt
City	State	Zip Code	1 0 1 3 2 0 1 0 Transaction ID: 37130756
Stevensville	MI	49127-9376	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer Radiology Associates of Berrie Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		c Radiologist Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen Mailing Address 6612 Cliffbrook Dr	'		Date of Receipt
City	State	Zip Code	1 0 1 3 2 0 1 0 Transaction ID: 37130760
<u>Dallas</u>	TX	75254-8613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.34
Name of Employer Southwest Imaging & Inter- ven specialis	Occupation Diagnostic	c Radiologist	
Receipt For: Primary General Other (specify) ♥	Aggregate `	Year-to-Date ▼ 2083.40	
Full Name (Last, First, Middle Initial) Dr. Douglas Montgomery			Date of Receipt
Mailing Address 45 Glenwood Rd			10 13 YYYY 10 13 2010
City West Hartford	State CT	Zip Code 06107-1506	Transaction ID: 37130761 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Jefferson Radiology	Occupation Diagnostic	c Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional))		275.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 50 (check only one) X
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personable name and address of any political committee to	
American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. James Courtney Mailing Address 27 Hillwood Rd		Date of Receipt
City	State Zip Code	1 0 1 3 2 0 1 0 Transaction ID: 37130762
Mobile	AL 36608-2311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Radiology Associates of Mobile	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 469.25	1
Full Name (Last, First, Middle Initial) Dr. Demetrius Morros Mailing Address 7418 Ridgecrest Co	urt Rd	Date of Receipt
		10 13 2010
City	State Zip Code	Transaction ID: 37130763
Birmingham FEC ID number of contributing federal political committee.	AL 35242-0525	Amount of Each Receipt this Period 83.34
Name of Employer Birmingham Radiological Group P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 833.40	
Full Name (Last, First, Middle Initial) Dr. Jugesh Cheema		Date of Receipt
Mailing Address 2466 Oak Bend Pl		10 13 2010
City	State Zip Code	Transaction ID: 37130772
Newburgh FEC ID number of contributing federal political committee.	IN 47630-8053	Amount of Each Receipt this Period 60.00
Name of Employer Medical Center of Delaware	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional	·	185.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 50 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and address	s of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Rita Freimanis			Date of Receipt
Mailing Address Wake Forest University Medical Center Blvd City	d State	Zip Code	1 0 1 3 2 0 1 0 Transaction ID: 37130773
Winston Salem FEC ID number of contributing federal political committee.	C	27157-1088	Amount of Each Receipt this Period 25.00
Name of Employer Wake Forest Univ Sch of Medicine Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic R Aggregate Yea		
Full Name (Last, First, Middle Initial) Dr. Daniel Cohen Mailing Address 1480 Brookfield Ro	ad		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 37130774
Yardley	PA	19067-3930	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Radiology Affiliates of Central New Je Receipt For: Primary General	Occupation Diagnostic R Aggregate Yea		1
Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0 0]
Dr. Raja Cheruvu Mailing Address 165 Via Foresta Ln			Date of Receipt 1 0 1 3 2 0 1 0
City	State	Zip Code	Transaction ID: 37130775
Williamsville	NY	14221-1984	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Windsong Radiology Group	Occupation Diagnostic R		
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	1300.00	
SUBTOTAL of Receipts This Page (optional	al)		115.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 50 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ciation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Raymond A. Armstrong			Date of Receipt
	Mailing Address Radiology of Huntsvill 2006 Franklin St SE S			10 13 2010
	City	State	Zip Code	Transaction ID: 37130776
	Huntsville	AL	35801-4537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Baptist Medical Ctr-Montc- lair	Occupation Diagnos	on tic Radiologist	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Paul Lampert			Date of Receipt
	Mailing Address 2240 S Elks Ln Unit 5	5		10 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 37130778
	Yuma	AZ	85364-6284	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer MDIG	, ' <u> </u>	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	
с. С.	Full Name (Last, First, Middle Initial) Dr. H E. Longmaid, III			Date of Receipt
	Mailing Address 52 Harwich Rd			10 13 7 2010
	City	State	Zip Code	Transaction ID: 37130779
	Chestnut Hill FEC ID number of contributing federal political committee.	C	02467-3023	Amount of Each Receipt this Period 41.67
	Name of Employer Deaconess Hospital	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 416.70	
	SUBTOTAL of Receipts This Page (optional) .			266.67
İ	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Amy Sobel Mailing Address 11104 Creek Point City Matthews FEC ID number of contributing federal political committee. Name of Employer Charlotte Radiology Receipt For:	Dr State Zip Code NC 28105-7702 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. William Deeter, III Mailing Address 14 Ryedale Ct City Greenville FEC ID number of contributing federal political committee. Name of Employer Greenville Radiology	State Zip Code SC 29615-6037 C	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 1 3 2 0 1 0 Transaction ID: 37130785 Amount of Each Receipt this Period 41.67
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Richard Gregor Mailing Address 41 Hummingbird Ro	Aggregate Year-to-Date ▼ 416.70	Date of Receipt
City Wyomissing FEC ID number of contributing federal political committee. Name of Employer West Reading Radiology Assoc Receipt For: Primary General Other (specify)	State Zip Code PA 19610-2849 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Transaction ID: 37134593 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional	ı) >	1066.67

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	name and ad	dress of any political o	of the y Page by any person committee to s	FOR LINE NUMBER: PAGE 46 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17 for the purpose of soliciting contributions olicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Dr. Janet Storella Mailing Address 6515 Fallwind Ln				Date of Receipt 1 0 1 3 2 0 1 0
	City	State	Zip Code		Transaction ID: 37158142
	Bethesda	MD	20817-4941		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			40.00
	Name of Employer Drs Grover, Christie & Me- rritt	Occupation Diagnost	n tic Radiologist		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼	800.00	
В.	Full Name (Last, First, Middle Initial) Dr. William Wallace				Date of Receipt
	Mailing Address 2317 Raintree St NE				10 13 2010
	City	State	Zip Code		Transaction ID: 37158145
	Canton	OH	44705-3143		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			90.00
	Name of Employer Radiology Associates of Canton	Occupation Diagnost	n tic Radiologist		
	Receipt For:	Aggregate	e Year-to-Date		1
	Primary General Other (specify) ▼		2	270.00	

SUBTOTAL of Receipts This Page (optional)	•	130.00
TOTAL This Period (last page this line number only)	•	33180.08

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributor for commercial purposes, other than using the name and address of any political committee to solicit contributions from such common the form of the purpose of seliciting contributions from such committee. NAME OF COMMITTEE (in Full)	rate schedule(s) FOR LINE NUMBER: PAGE 47 / 50	Use ser	EDULE B (FEC Form	0
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such common NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Diane Black For Congress Mailing Address 819 Plantation Blvd City Gallatin TN 37066 Purpose of Disbursement Candidate Name Ms. Diane Black Office Sought: X House Disbursement For: 2010 Senate President State: TN District: 06 Full Name (Last, First, Middle Initial) Priends Of Schumer Office Sought: X House Disbursement Tor: 2010 City New York Purpose of Disbursement Candidate Name Sen. Charles E. Schumer Office Sought: House President State: NY District: Full Name (Last, First, Middle Initial) President State: NY District: Full Name (Last, First, Middle Initial) President State: NY District: Full Name (Last, First, Middle Initial) President State: NY District: Full Name (Last, First, Middle Initial) President State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar Other (specify) ▼ Transaction ID: 36908489 Date of Disbursement Transaction ID: 36918998 Date of Dis	ategory of the circleck only one) Summary Page 21b 22 X 23 24 25 2	ITS for each	MIZED DISBURSEMEN	IT
NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee Full Name (Last, First, Middle Initial) Diane Black For Congress Mailing Address 819 Plantation Blvd City Gallatin President State: TN 37066 Full Name (Last, First, Middle Initial) Candidate Name Ms. Diane Black Office Sought: X House President State: TN District: 06 Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address 509 Madison Ave Suite 1902 City New York Ny 10022 City Candidate Name Sen. Charles E. Schumer Office Sought: X House Primary X General Pr				
Diane Black For Congress Mailing Address 819 Plantation Blvd City Gallatin TN 37066 Purpose of Disbursement Candidate Name Ms. Diane Black President President Other (specify) ▼ City State Zip Code Type Mailing Address 509 Madison Ave Suite 1902 City New York NY 10022 Purpose of Disbursement Category/ Type Transaction ID: 36906489 Date of Disbursement Amount of Each Disbursement Transaction ID: 36906489 Date of Disbursement 300 Transaction ID: 36906489 Date of Disbursement Other (specify) ▼ Transaction ID: 36906489 Date of Disbursement Other (specify) ▼ Transaction ID: 36906489 Date of Disbursement 10: 36906489 Date of Disbursement Other (specify) ▼ Transaction ID: 36906489 Date of Disbursement Transaction ID: 36906489 Date of Disbursement Other (specify) ▼ Transaction ID: 36906489 Date of Disbursement Transaction ID: 36906489 Date of Disbursement 10: 36906489 Date of Disbursement Transaction ID: 36906489 Date of Disbursement Other (specify) ▼ Transaction ID: 3691898 Date of Disbursement 10: 36906489 Date of Disbu		•	ME OF COMMITTEE (In Full)	
City Gallatin City Giftice Sought: City Senate President State: TN District: 06 Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address Son Madison Ave Suite 1902 City City City City City City City Cit			,	<u></u>
Gallatin TN 37066 Purpose of Disbursement Candidate Name Ms. Diane Black Office Sought: X House Senate Primary X General Other (specify) ▼ Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address 509 Madison Ave Suite 1902 City New York NY 10022 Purpose of Disbursement Candidate Name Sen. Charles E. Schumer Office Sought: House Primary X General Other (specify) ▼ Transaction ID: 36906489 Date of Disbursement NY 10022 Amount of Each Disbursement Category/ Type Office Sought: House Primary X General Other (specify) ▼ Transaction ID: 36906489 Date of Disbursement NY 10022 Amount of Each Disbursement Category/ Type Transaction ID: 3691898 Date of Disbursement For: 2010 Amount of Each Disbursement Category/ Type Transaction ID: 3691898 Date of Disbursement For: 2010 Amount of Each Disbursement Transaction ID: 36918998 Date of Disbursement Amount of Each Disbursement Transaction ID: 36918998 Date of Disbursement Transaction ID: 36906489 Date of Disbursement Transaction ID: 36906489 Date of Disbursement Transaction ID: 36906489 Date of Disbursement Total Transaction ID: 36906489 Date of Disbursemen		Blvd	iling Address 819 Plantation	
Candidate Name Ms. Diane Black Office Sought:	37066			
Ms. Diane Black Office Sought:				
Senate President State: TN District: 06 Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address 509 Madison Ave Suite 1902 City State Zip Code NY 10022 Purpose of Disbursement Candidate Name Sen. Charles E. Schumer Office Sought: House President Primary X General Other (specify) ▼ State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address 2222 E. Cedar Ave. City State Zip Code NY 10022 Disbursement For: 2010 Primary X General Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36906489 Amount of Each Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement	Туре	T 5	s. Diane Black	
Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address 509 Madison Ave Suite 1902 City State Zip Code NY 10022 Purpose of Disbursement Candidate Name Sen. Charles E. Schumer Office Sought: House President State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address 2222 E. Cedar Ave. City State Zip Code AZ 86004 Purpose of Disbursement Candidate Name State Disbursement City State Zip Code AZ 86004 Purpose of Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010 Category/ Type Amount of Each Disbursement Transaction ID: 36918998 Date of Disbursement 1 0 11 Category/ Type Amount of Each Disbursement 1 0 11 Category/ Type Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010	X General	Primary	Senate President	
Mailing Address 509 Madison Ave Suite 1902 City State Zip Code New York NY 10022 Purpose of Disbursement Candidate Name Sen. Charles E. Schumer Office Sought: House Primary General Other (specify) ▼ State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address 2222 E. Cedar Ave. City State Zip Code AZ 86004 Purpose of Disbursement Candidate Name AZ 86004 Purpose of Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010 Amount of Each Disbursement Transaction ID: 36918998 Date of Disbursement 1 0 11 Category/ Type Amount of Each Disbursement 1 0 11 Category/ Type Office Sought: X House Disbursement For: 2010	Transaction ID: 36906489		Il Name (Last, First, Middle Initial)	
City State Zip Code NY 10022 Purpose of Disbursement Candidate Name Sen. Charles E. Schumer Office Sought: House Primary X General Other (specify) ▼ State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address 2222 E. Cedar Ave. City State Zip Code AZ 86004 Purpose of Disbursement Candidate Name AZ 86004 Purpose of Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010 Amount of Each Disbursement Transaction ID: 36918998 Date of Disbursement 1011 Category/ Type Office Sought: X House Disbursement For: 2010			ends Of Schumer	
New York Purpose of Disbursement Candidate Name Sen. Charles E. Schumer Office Sought: House President State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address Z222 E. Cedar Ave. Transaction ID: 36918998 Date of Disbursement Mo Transaction ID: 36918998 Date o		ve Suite 1902	iling Address 509 Madison A	
Candidate Name Sen. Charles E. Schumer Office Sought: House X Senate Primary X General Other (specify) ▼ State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address 2222 E. Cedar Ave. City State Zip Code Flagstaff AZ 86004 Purpose of Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010 O11 Category/ Type Transaction ID: 36918998 Date of Disbursement A Zip Code AB6004 Amount of Each Disbursement O11 Category/ Type Office Sought: X House Disbursement For: 2010	10022			
Sen. Charles E. Schumer Office Sought: House	011			
X Senate President Other (specify) ▼ State: NY District: Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address 2222 E. Cedar Ave. City Flagstaff AZ State Primary X General Other (specify) ▼ Transaction ID: 36918998 Date of Disbursement M M M / D D D / Y Y Y Y Z Mount of Each Disbursement A Mount of Each Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010				
Full Name (Last, First, Middle Initial) Paul Gosar For Congress Mailing Address 2222 E. Cedar Ave. City State Zip Code Flagstaff AZ 86004 Purpose of Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010 Transaction ID: 36918998 Date of Disbursement 10 1	X General	Primary	χ Senate President	
Mailing Address 2222 E. Cedar Ave. City State Zip Code Flagstaff AZ 86004 Purpose of Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010	Date of Disbursement		Il Name (Last, First, Middle Initial)	
Flagstaff AZ 86004 Purpose of Disbursement Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010		Ave.	iling Address 2222 E. Cedar	
Candidate Name Mr. Paul Gosar Office Sought: X House Disbursement For: 2010	86004			
Mr. Paul Gosar Office Sought: X House Disbursement For: 2010				
	Туре		. Paul Gosar	
President Other (specify) ▼	X General	Primary	Senate President	
	10500.00		ALE. AL DISHIUL UI	_

IT	CHEDULE B (FEC Form 3X)	Use sepa	Use separate schedule(s)		FOR LINE NUMBER: PAGE 48 / 50			
	EMIZED DISBURSEMENTS	for each o	category of the Summary Page	(check only	y one) 22 X 23 24 25 28a 28b 28c 29 3			
An	y Information copied from such Reports and State	 ments may no	ot be sold or used					
	or commercial purposes, other than using the nan							
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Association	on Political	Action Commi	ttee				
	Full Name (Last, First, Middle Initial) Tom Rooney For Congress				Transaction ID: 36933150 Date of Disbursement			
	Mailing Address 2336 S. East Ocean Blv	10 M / D 0 3 / Y 2 0 1 0 Y						
	City Stuart	State FL	Zip Code 34996		Amount of Each Disbursement this Period			
	Purpose of Disbursement Candidate Name			011	1500.00			
	Rep. Thomas Rooney		2010	Category/ Type				
	Senate President	ement For: Primary Other (spe	2010 X General cify) ▼					
	State: FL District: 16 Full Name (Last, First, Middle Initial) Rob Andrews U.S. House Committee		Transaction ID: 36977639 Date of Disbursement					
	Mailing Address 215 Fourth Avenue Suite 200			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$				
	City Haddon Heights	State NJ	Zip Code 07076		Amount of Each Disbursement this Period			
	Purpose of Disbursement			011	1000.00			
	Candidate Name	Category/ Type						
	Rep. Robert Andrews		I					
	Office Sought: X House Senate President Disburs	ement For: Primary Other (spe	2010 X General					
	Office Sought: X House Disburs Senate	Primary	X General		Transaction ID: 36977641 Date of Disbursement			
	Office Sought: X House Senate President State: NJ District: 01 Full Name (Last, First, Middle Initial)	Primary	X General					
	Office Sought: X House Senate President State: NJ District: 01 Full Name (Last, First, Middle Initial) Friends Of Roy Blunt	Primary	X General		Date of Disbursement			
	Office Sought: X House Senate President State: NJ District: 01 Full Name (Last, First, Middle Initial) Friends Of Roy Blunt Mailing Address P.O. Box 50100 City Springfield Purpose of Disbursement	Primary Other (spec	X General cify) ▼	011	Date of Disbursement			
	Office Sought: X House Senate President State: NJ District: 01 Full Name (Last, First, Middle Initial) Friends Of Roy Blunt Mailing Address P.O. Box 50100 - City Springfield Purpose of Disbursement Candidate Name Mr. Roy Blunt	Primary Other (spec	X General cify) ▼	011 Category/ Type	Date of Disbursement M M M / D D D / Y Y Y O Y O Y Amount of Each Disbursement this Period			
	Office Sought: X House Senate President State: NJ District: 01 Full Name (Last, First, Middle Initial) Friends Of Roy Blunt Mailing Address P.O. Box 50100 - City Springfield Purpose of Disbursement Candidate Name Mr. Roy Blunt Office Sought: House X Senate President	Primary Other (spec	X General cify) ▼ Zip Code 65805 2010 X General	Category/	Date of Disbursement M M / D D D / Y Y Y O Y O Y Amount of Each Disbursement this Period			
	Office Sought: X House Senate President State: NJ District: 01 Full Name (Last, First, Middle Initial) Friends Of Roy Blunt Mailing Address P.O. Box 50100 - City Springfield Purpose of Disbursement Candidate Name Mr. Roy Blunt Office Sought: House X Senate Disburs	Primary Other (special State MO	X General cify) ▼ Zip Code 65805 2010 X General	Category/	Date of Disbursement M M M / D D D / Y Y Y O Y O Y Amount of Each Disbursement this Period			

Any Information copied from such Reports and Star or for commercial purposes, other than using the national star of the star o	for each Detailed	arate schedule(s) category of the Summary Page	(check only	
or for commercial purposes, other than using the na			27	22 X 23 24 25 28 28c 29
-				
NAME OF COMMITTEE (In Full) American College of Radiology Association				
Full Name (Last, First, Middle Initial) Friends Of Jason Chaffetz				Transaction ID: 36977752 Date of Disbursement
Mailing Address 315 Westfield Circle		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $		
City Alpine	State UT	Zip Code 84004		Amount of Each Disbursement this Perio
Purpose of Disbursement			011	2500.00
Candidate Name Rep. Jason Chaffetz		0040	Category/ Type	
Senate President	Primary Other (spe	2010 X General ecify) ▼		
State: UT District: 03 Full Name (Last, First, Middle Initial) Sandy Adams For Congress				Transaction ID: 36977755 Date of Disbursement
Mailing Address P. O. Box 1566		$\begin{bmatrix}\begin{smallmatrix}M\\1\end{smallmatrix}0&M\end{smallmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D\\0\end{smallmatrix}0&8\end{smallmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}Y\\2\end{smallmatrix}0&1\end{smallmatrix}0&Y\\ 2&0\end{smallmatrix}1&0^{Y}$		
City Orlando	State FL	Zip Code 32802		Amount of Each Disbursement this Perio
Purpose of Disbursement			011	2500.00
Candidate Name Sandy Adams			Category/ Type	
Senate President	Primary Other (spe	2010 X General ecify)		
State: FL District: 24 Full Name (Last, First, Middle Initial) Kuster For Congress		Transaction ID: 36977756 Date of Disbursement		
Mailing Address P.O. Box 1498		M M / D B / Y Y O Y O Y		
City Concord	State NH	Zip Code 03302		Amount of Each Disbursement this Perio
Purpose of Disbursement			011	5000.00
Candidate Name Ms. Ann Kuster			Category/ Type	
	rsement For:	2010 X General		
Senate President	Primary Other (spe			
Senate	Other (spe	ecify) 🔻		10000.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EX	PENDITURI	ES		PAGE 50 / 50 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
American College of Radiology Association Po	olitical			C C00343459
Check if 24-hour notice 48-	hour notice			G sees is is
Full Name (Last, First, Middle, Initial) of Pa			Date	
Campaign Grid	,,,,,,		M M /	01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address			Amount	
223 Summit Avenue				28000.00
City	State	Zip Code		n ID: 36965974
Fort Washington	PA	19034	Office Sough	
Purpose of Expenditure Internet Video Ad		Category/ Type 004		X Senate District: Presidential
Name of Federal Candidate supported or C Sen. David Vitter	Opposed by expend	iture:	Check One:	X Support Oppose
Gen. David Villei			Disbursemen	t For: Primary X General
Colonday Veey To Date Day Florities			Oth	er (specify) :
Calendar Year-To-Date Per Election	L	28000.00	2010	
for Office Sought				
Full Name (Last, First, Middle, Initial) of Pa	yee		Date	
Marsh Copsey + Associates, Inc.			1, 0	01 2010
Mailing Address 601 Thirteenth Street, N.W. 11th Floor North	Amount 6800.00			
City	State	Zip Code	Transactio	n ID: 36965975
Washington	DC	20005	Office Sough	t: House State: LA
Purpose of Expenditure				X Senate District:
Internet Video Ad		Category/ Type 004		Presidential
Name of Federal Candidate supported or C	Opposed by expend	ture:	Check One:	X Support Oppose
Sen. David Vitter				
			Disbursemen	
Calendar Year-To-Date Per Election		34800.00	2010	er (specify) :
for Office Sought		34800.00	2010	
(a) SUBTOTAL of Itemized Independent Exp	enditures			34800.00
(b) SUBTOTAL of Unitemized Independent E	Expenditures			
(c) TOTAL Independent Expenditures				34800.00
Under penalty of perjury I certify that the independence or at the request or suggestion of, any candidate of committee) any political party committee or its age	or authorized committ			
DR William Herrington		Date 1 0		Y Y Y Y Y Y 2 0 1 0
Signature				